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10/718,188	11/20/2003 RULE	623	3734	17273

APPLICANTS

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** CONTINUING DATA ***** none /EB/

** FOREIGN APPLICATIONS *****

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** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

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Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	<u>/ERIC D BLATT/</u>	<u>Examiner's Signature</u>		Initials	JAPAN	9	47	5

ADDRESS

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TITLE

Stent delivery system and indwelling method for stent

FILING FEE RECEIVED 1688	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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